



AFFORDABLE CARE ACT MASSACHUSETTS IMPLEMENTATION UPDATE

August 4, 2011

Quick Links

[MA-ACA Website](#)



Join Our
Mailing List

These Updates, published by the Executive Office of Health and Human Services (EOHHS) in consultation with the other state agencies involved in ACA implementation, will bring you news related to the implementation of provisions of the ACA here in Massachusetts.

Grants and Demonstrations

The ACA provides funding opportunities to transform how health care is delivered, expand access to care and support healthcare workforce training.

Grant Announcements

Consumer Operated and Oriented Plan (CO-OP) Program. Announced July 28, 2011. §1322 of the ACA created the CO-OP program to foster the creation of new consumer-governed, private, nonprofit health insurance issuers. In addition to improving consumer choice and plan accountability, the CO-OP program also seeks to promote integrated models of care and enhance competition in the exchanges established under §1311 and §1321 of the ACA. \$3.8 billion is available for loans to capitalize eligible prospective CO-OPs with a goal of having at least one CO-OP in each state. Applicants that will offer CO-OP qualified health plans on a statewide basis, will use integrated care models, and have significant private support will be given priority. To be eligible for a loan, an applicant must be a private nonprofit member organization and must intend to become a CO-OP. An organization is not eligible for a loan if it was licensed by a state as a health insurance issuer as of July 16, 2009 or it was a related entity or predecessor organization of such an issuer. An organization is also not eligible for a CO-OP loan if the organization has as a sponsor a state or local government. The first round of applications is due October 17, 2011 and subsequently on a quarterly basis until December 31, 2012. CCIIO expects to fund one CO-OP in each state and the District of Columbia, making 51 awards.

Read the grant announcement at: [Grants](#)

Guidance

7/29/11 CMS filed a final rule (to be published on Thursday 8/4/11) regarding the **hospice wage index for 2012** that includes a 2.5% payment increase in Medicare payments. The final rule also implements a hospice quality reporting program, as required by the ACA, and revises the hospice requirement for a face-to-face encounter for recertification of a patient's terminal illness. The rule is effective October 1, 2011.

Read the rule at: <http://www.gpo.gov/fdsys/pkg/FR-2011-08-04/pdf/2011-19488.pdf>

Read the press release at: [CMS](#)

8/1/11 HHS issued an interim rule regarding **coverage of no-cost preventive health services for women in new private health plans in plan years starting on or after August 1, 2012**. The guidelines, developed by the Institute of Medicine, require private health plans to cover women's preventive services such as well-woman visits, breastfeeding support, domestic violence screening, and contraception without charging a co-payment, co-insurance or a deductible.

The new guidelines exempt group health plans sponsored by certain religious employers and allow those religious institutions that offer insurance to their employees the choice of whether or not to cover contraception services.

The guidelines can be found at: www.hrsa.gov/womensguidelines/

More information on the HHS guidelines for expanding women's preventive services can be found at: <http://www.healthcare.gov/news/factsheets/womensprevention08012011a.html>
Comments are due on September 30, 2011.

Read the interim final rule which was published on August 3, 2011 at:

<http://www.gpo.gov/fdsys/pkg/FR-2011-08-03/pdf/2011-19684.pdf>

The Institute of Medicine (IoM) was charged with recommending what preventive services must be covered without co-pays for patients by health plans under the ACA. The IoM recommended that birth control, breastfeeding support and domestic violence counseling all be covered by insurance without co-pays. The IoM recommendations, released on July 19, 2011, can be read at: [IoM](#)

Prior guidance can be viewed at www.healthcare.gov

News

8/1/11 Joel Ario, the HHS official who has overseen much the early stages of ACA implementation including the release of the health insurance exchange regulations, is leaving the agency. Ario is leaving his position as director of the Office of Health Insurance Exchanges at CCIIO. Although Ario will leave D.C. on August 26 and head to his home in Pennsylvania, he will continue to lead the department's exchange team until September 23. Steve Larsen, the Director of CCIIO (the Center for Consumer Information and Insurance Oversight) will work with Tim Hill, his deputy director who has also held several other positions within HHS, to lead the exchange development effort. Larsen and Hill intend to hire a state liaison to encourage each state to run its own exchange, rather than rely on a federally administered fallback.

HHS has not made a statement about where Ario will next work. Ario holds a Harvard Law degree and attended divinity school after finishing college. Previous to his time at HHS Ario organized and ran Public Interest Research Groups, which lobby for consumer interests. He then served as the top insurance regulator in Oregon from 2000 to 2007 and was Pennsylvania's insurance commissioner from 2007 to 2010.

Upcoming Events

Quarterly Stakeholder Meeting

Patient Protection and Affordable Care Act Implementation meeting

Monday October 17, 2011 from 11:00 A.M.-12:00 P.M.

1 Ashburton Place, 21st floor, Boston

Open Meeting

Integrating Medicare and Medicaid for Dual Eligible Individuals

August 31, 2011, 10 am- 12pm

Saxe Room, Worcester Public Library

Worcester, MA

Consumer Focused Meeting

Integrating Medicare and Medicaid for Dual Eligible Individuals

September 22, 2011, 1pm - 3pm

1 Ashburton Place, 11th Floor, Matta Conference Room

Boston, MA

Bookmark the **Massachusetts National Health Care Reform website**

at: www.mass.gov/nationalhealthreform to read updates on ACA implementation in Massachusetts.

Remember to check www.mass.gov/masshealth/duals for information on the "**Integrating Medicare and Medicaid for Dual Eligible Individuals**" initiative.